a valid OMB control number.

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number **DECLARATION FOR UTILITY OR** Chin Pao Kuo **DESIGN** First Named Inventor PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number Filing Date ☑ Declaration ☐ Declaration OR Submitted Submitted after Initial Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing Examiner Name required)

A to -1					
	entor, I hereby declare that:				
My residence, post office	e address, and citizenship are	as stated below next to m	y name.		
I believe I am the origina	al, first and sole inventor (if onl	ly one name is listed below	v) or an original, f	irst and joint inventor (if pl	ural
names are listed below)	of the subject matter which is	s claimed and for which a pa	atent is sought or	the invention entitled:	7
ELECTRIC	CAL CONNECTOR	ASSEMBLY			
the specification of whic					
is attached hereto	- (114)	tle of the Invention)			
OR	-	·			
was filed on (MM/I	OD/YYYY)	as Unite	ed States Applica	ition Number or PCT Interr	national
Application Number	and w	vas amended on (MM/DD/Y	(777)	(if app	olicable).
I hereby state that I have	reviewed and understand the	contents of the above iden	/		
amended by any amendm	nent specifically referred to abo	ove.			
I acknowledge the duty to	disclose information which is	material to patentability as	defined in 37 CF	'A 1.56.	
					
icenincale, or abbial or any	rity benefits under 35 U.S.C. y PCT international applicatio	on which decionated at lea	act acc country.	athor than the I laited Cta	
l'America, listed delow and n	have also identified below, by a application having a filing date	checking the how any forci	iaa aaaliaatiaa (a		ficate,
			. Horr on wines pin	inty is claimed.	
Prior Foreign Application		Foreign Filing Date	Priority	Certifled Copy Attack	hed?
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO	
92115453	TAIWAN	June/06/03			
	1				
<u> </u>	1				
			<u> </u>	<u> </u>	
Additional foreign applic	cation numbers are listed on a	supplemental priority data	sheet PTO/SB/0	2B attached hereto:	
I hereby claim the benefit i	under 35 U.S.C. 119(e) of any	y United States provisional	application(s) lis	red below.	
Application Number	(s) Filing Date	e (MM/DD/YYYY)			
1				onal provisional applica	ition
i				ers are listed on a	-
i				emental priority data she SB/02B attached hereto	
1			1 10,0	D/U2D attached horoto	•
,	1	1			

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a	olus sign	(+) inside	this box	-2	+

Santa

Additional inventors are being named on the 1

PTO/SB/01 (12-97)
Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. U.S. Parent Application or PCT Parent Parent Filing Date Parent Patent Number (MM/DD/YYYY) (if applicable) Number Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Paten and Trademark Office connected therewith: Number Bar Code Lahelhere Registration Number Name 25859 PATENT TRADEMARK OFFICE Additional registered practitioner(s) named on supplemental Registered Practitioner Information shoot PTD/SR/M2C attached hereto Direct all correspondence to: 🔽 Customer ence address below or Bar Coc Name 25859 Address PATENT_TRADEMARK OFFICE **Address** State City ZIP Telephone I hereby dectare that all statements made herein of my own knowledge are true and that all statements made on information and belief air believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if anyl) Family Name or Sumame Kuo Chin Pao 07/11/03 Inventor's chin DAO Signature Taiwan Tu-Chen Taiwan Residence: City State Country Citizenship 1650 Memroex Drive Post Office Address Post Office Address U.S.A. 95050 CA ZIP Country Clara State

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Un	(*) inside this box -> + der the Paperwork Reduction id OMB control number.	Act of 19	195, no perso	Palent a na are required	and Tendament After	II & DEDA	9/30/98,	TO/SB/02A (3-6 OMB 0651-00 OF COMMERO nless it contains
DECLARATION			ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1					
Name of Additi	onal Joint Inventor, i	any:		A peti	tion has been fik	d for this ur	isigned i	nventor
Given Name (first and middle [if any])				Family Na	me or Suma	me		
	Yun Long			}	Ke			
inventor's Signature	ke Yu	n	Long			r	ate	07/11/0
Residence: City	Tu-Chen	su	ate	Countr	Taiwan	Chtz	enship	Tawian
Post Office Address	1650 Memore	x Dr	ive					
Post Office Address		<u> </u>						
City	Santa Clara	St	te C	ZIP	95050	Country	U.S.	Α.
Name of Additio	nal Joint Inventor, if	any:		A peliti	on has been filed	d for this uns	igned in	ventor
Given Na	ame (first and middle (if a	ny])			Family Nan	ne or Surnar	ne	
S	hih Tung			- }	Chang			
Inventor's Signature	Chang SI	nih	Tur	g	·		Date	07/11
Residence: City	Tu-Chen	Stat	le	Country	Taiwan	Citi	zenship	Taiwa
Post Office Address	1650 Memore	x Dr	ive					
Post Office Address								
City	Santa Clara	Sta	te CA	ZIP	95050	Country	υ	S.A.
Name of Addition	nal Joint Inventor, if a	ıny:		A petition	n has been filed	for this unsi	gned Inv	entor
Given Na	me (first and middle (if an	yl)			Family Nam	e or Sumam	e	
inventors Signature							ate	
Residence: City		State	,	Country		Cltiz	enship	
ost Office Address	1650 Memorex	Driv	ve					
Post Office Address					,		, 	
ity	Santa Clara	State	CA	ZIP	95050	Country	untry U.S.A.	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231. DO NOT SENO FEES OR COMPLETED FORMS TO THIS ADDRESS, SENO TO: Assistant Commissioner for Patents, Washington, DC 20231.